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TRANSMITTAL FORM				Application Number	flection of information unless it displays a valid OMB control number. 10/776,370			
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ENCLOSURES (Check all that apply)								
F. Amendm A A Extension Express / Informatio Certified Documer Repty to Incomple		ee Attach ent/Reply fiter Final ffidavits/d n of Time Abandonr on Disclos Copy of F tt(s) fitsing Pc te Applice	Attached Attach		rewing(s) icensing-related Papers retition feltition to Convert to a rovelsional Application ower of Attorney, Revocation hange of Correspondence Address ferminal Disclaimer request for Refund 5D, Number of CD(s) Landscape Table on CD ks			After Allowance Communication to TC Appeal Communication to Board of Appeals and Interferences Appeal Communication to TC (Appeal Motice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please Identify below):
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT								
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Signature		/Michael J. Swope/						
Printed name		Michael J. Swope						
Date		May 24, 2011 Reg. No. 38,041						
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